



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

	OMB APPROVAL 3235-0076		
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UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Alabama Street Senior Housing Associates, A California Limited Partnership	
Filing Under (Check bgx(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: Rew Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of lasuer (check if this is an amendment and name has changed, and indicate change.)	
Alabama Street Senior Housing Associates, A California Limited Partnership	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
26 O'Farrell Street, Ste. 600, San Francisco, CA 94108	415-421-8605
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Ownership, Construction and disposition of housing	PROCESSE
Type of Business Organization	EED 2 2/2007
☐ corporation ☐ limited partnership, already formed ☐ other (i business trust ☐ limited partnership, to be formed	please specify): FEB 2 2 2007
Month Year	THOMSON
Actual or Estimated Date of Incorporation or Organization: [0]7 [0]6 [Actual [Estimated Date of Incorporation or Organization:	
urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	•
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Musi File: All issuers making an offering of securities in reliance on an exemption under Regulation D 17d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering	. A notice is deemed filed with the U.S. Securities
ind Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	elow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual intocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
iling Fee: There is no federal filing fee.	
State:	•
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ILOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the same to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for ecompany this form. This notice shall be filed in the appropriate states in accordance with state law, his notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
	· · · · · · · · · · · · · · · · · · ·
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unlefiling of a federal notice.	
Persons who respond to the collection of information contained in required to respond unless the form displays a currently valid OM	

required to respond unless the form displays a currently valid OMB control number.

		A BASIC DO	wing special		
2. Enter the information r	equested for the fo	llowing:			
 Each promoter of 	the issuer, if the is	suct has been organized v	rithin the past five years;		
 Each beneficial ov 	ener having the pov	ver to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer
 Each executive of 	ficer and director o	of corporate issuers and of	corporate general and ma	naging partners of	partnership issuers; and
 Each general and 	managing partner (of partnership issuers.		-	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Menaging Partner
Full Name (Last name first, Alabama Street Housing	•				
Business or Residence Addre 26 O'Farrell Street, Ste.			ode)	·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Pastner
Full Name (Last name first,	if individual)				
NEF Assignment Corpor	ation				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
120 South Riverside Plaz	a. 15th Floor, Cl	nicago, IL_60606			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	odc)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	S (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		· ·
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	dc)	<u>-</u>	
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	(individual)			<u> </u>	
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)	·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	,			· -
Business or Residence Addre	35 (Number and	Street, City, State, Zip Co	de)		
	(I tea blace	ok sheet or convendings:	dditional agrice of this of	heat as necessary)	

國金融	保证事		Bit Land	a a sy	DEORGA	ON AND		开始呢				
THE PERSON NAMED IN								70-1-0-1			Yes	No
l. Has	the issuer so	ld, or does	the issuer	intend to s	ell, to non-	accredited	investors i	in this offe	ring?	****************	[7]	1
			An.	swer also i	in Appendi	x, Column	2, if filing	under UL	OE.			
2. Wha	at is the mini	mum invest	ment that t	will be acc	epted from	any indivi	dual?	·····	······································		\$	
1 Dec	h fc			٠ . هـ .	1. 20						Yes	No
	s the offering										_	&
com If a p or si	er the information or single person to be like the control of the	nilar remun isted is an as name of the l	eration for ssociated p broker or d	solicitation erson or ag ealer. If m	n of purcha: sent of a bro tore than fiv	sers in cond ker or deal ve (5) perso	nection with er registere ons to be lis	b sules of se d with the ited are ass	curities in SEC and/o	the offerin r with a sta	g. te	
Full Nan	ic (Last name	tirst, if ind	lividual)									
	or Residence	Address ()	Virmher an	d Street C	ity State	Zin Code)						
Daginezo	Of Residence	, , rad, c.s. (1	vomoci an	a succe, c	ny, state,	zip couc)						
Name of	Associated B	roker or De	ealer		-	 -				·		
States in	Which Perso	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchaser	<u> </u>					
(Che	ck "All State	s" or check	individua	l States)	,,,,		*********	***********		,	🗀 Al	I States
ΙΛĹ) (AR)	ĀZ	AR	[CA]	(co)	<u> কিন্</u> টা	क्रिकी	किंद्रा	leg)	(GA)		(ms)
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MT		ŊV	NH)	NI	NM]	[NY]	NC.	ND.	OH	ŌK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
N/A	or Residence	<u> </u>	<u> </u>	d Street, C	City, State,	Zip Code)						
Name of	Associated B	roker or De	aler									·
	· · · · · · · · · · · · · · · · · · ·						<u>`_</u>					<u>, , , , , , , , , , , , , , , , , , , </u>
	Which Person	_										- - .
(Che	ck "All State	s" or check	individua)	States)		******	, , , , , , , , , , , , , , , ,	,	,	,,	. [] Al	l States
AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	$\overline{\mathbf{m}}$
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	1961		TN	TX]	UT	[VT]	(VA)	WA	WV	W()	<u>WY</u>	PR
Full Nam WA	c (Last name	first, if ind	ividual)					,				
Business	or Residence	Address (1	Vumber an	d Street, C	ity, State,	Zip Code)						
Name of	Associated B	roker or De	aler		 _		 -	<u></u>				
States in 1	Which Dames	Tietad Ila	. Calisiand	an Internal	A Calculate	<u> </u>						
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	[IN]	IA)	KS	KY		ME	MD	MA	MI	MN	MS	MO
(MT)	NE	NV	NH]	N	NM	(NY	NC	ND	OH)	OK)	OR	PA
RI	SC	SD	TN		UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	: !	AAleccide
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	s
	Equity	S	_ s <u></u>
	Common Preferred		
	Convertible Securities (including warrants)	\$	s
	Partnership Interests	s 2,428,918.00	\$ 15,000.00
	Other (Specify		
	Total	2,428,918.00	\$ 15,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	,	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$ ·
	Non-accredited Investors		s
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the Issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of	Dollar Amount Sold
	Rule 505'	Security	· · ·
	Regulation A		\$
	Rule 504		s
	Total		\$ \$ 0.00
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	<u></u> -	
	Transfer Agent's Fees		s
	Printing and Engraving Costs	_	s
	Legal Fees	_	s
	Accounting Fees	_	\$ 5,000.00
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)	 -	\$
	The state of the s		- 5,000,00

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	 Enter the difference between the aggrega and total expenses furnished in response to Pa proceeds to the issuer." 	ort C — Question 4.a. This	difference is the "adjust	ed gross	\$
·.	Indicate below the amount of the adjusted geach of the purposes shown. If the amount check the box to the left of the estimate. The proceeds to the issuer set forth in response	t for any purpose is not ke total of the payments listed	nown, furnish an estin I must equal the adjust	nate and	
	proceeds to the issuer set total in response	to Part C — Question 4.8	anove.	Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		<u> </u>	\$ 480,000.0	0 J 5 9,430.00
	Purchase of real estate				
	Purchase, rental or leasing and installation and equipment	of machinery		_	
	Construction or leasing of plant buildings a	and facilities			s
	Acquisition of other businesses (including offering that may be used in exchange for t issuer pursuant to a merger)	he assets or securities of a	nother	··········	_ [] \$
	Repayment of indebtedness		***************************************		_ J \$_1,486,776.00
	Working capital			s_447,712.0	0 🗆 s
	Other (specify):				_ [] \$
			_		_ 🗆 \$
	Column Totals	······		S 927,712.00	S 1,498,206.0
	Total Payments Listed (column totals added	d)		s_2	,423,918.00
Ē.					
дла	ssuer has duly caused this notice to be signed sture constitutes an undertaking by the issue of formation furnished by the issuer to any ne	r to furnish to the U.S. Sec	urities and Exchange	Commission, upon writt	ule 505, the following on request of its staff,
suc	r (Print or Type)	Signature		Date	• •
EE	ATTACHED				<u> </u>
	of Signer (Print or Type)	Title of Signer (P	rint or Type)		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ISSUER:

ALABAMA STREET SENIOR HOUSING ASSOCIATES, A CALIFORNIA LIMITED PARTNERSHIP, a California limited partnership

By: Alabama Street Housing, LLC, a California limited liability company, its general partner

By: Stevenson Housing Corporation, a California nonprofit public benefit corporation, its sole member 1

By: /// DOWN

**		CANAL RESEARCE STORY SHE			
1.		230.262 presently subject to any of the d		Yes	No S
		See Appendix, Column 5, for stat	response.		
2.	The undersigned issuer hereby und D (17 CFR 239.500) at such time	dertakes to furnish to any state administrato s as required by state law.	or of any state in which this notice	is filed a no	tice on Form
3.	The undersigned issuer hereby un issuer to offerees.	dertakes to furnish to the state administra	itors, upon written request, infor	mation furn	ished by the
4.	limited Offering Exemption (ULO	s that the issuer is familiar with the condi E) of the state in which this notice is filed of establishing that these conditions have	and understands that the issuer		
	ter has read this notification and kno thorized person,	ws the contents to be true and has duly caus	ed this notice to be signed on its b	chalf by the	undersigned
issuer (Print or Type)	Signature	Date		
SEE AT	TACHED				
Name (Print or Type)		Title (Print or Type)			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

ISSUER:

ALABAMA STREET SENIOR HOUSING ASSOCIATES, A CALIFORNIA LIMITED PARTNERSHIP, a California limited partnership

By: Alabama Street Housing, LLC, a California limited liability company, its general partner

By: Stevenson Housing Corporation, a California nonprofit public benefit corporation, its sole member

By:-